

#### MISSOURI DEPARTMENT OF REVENUE **TAXATION BUREAU**

P.O. BOX 300, JEFFERSON CITY, MISSOURI 65105-0300 (573) 751-2611 TDD (800) 735-2966

## **ULTIMATE VENDOR CERTIFICATE SALES**

FORM

DLN

| TO FI  | EDERAL GOVERNME   | NT ONLY  | (1124.1120              | .00)  |                                |                              |            |
|--|---|--|-------------------------|---|--------------------------------|------------------------------|------------|
| ULTIMATE VENDOR NAME                             |   |  | TELEPHONE NUMB          | ER  | FEIN OR SOCIAL SECURITY NUMBER |                              |            |
| ADDRESS  |   | P.O. BOX   | CITY                    |   | STATE                          | ZIP                          |            |
| PRODUCT CODE                                     |   |  |                         |   |                                |                              |            |
| 065 — Gasoline<br>123 — Alcohol<br>124 — Gasohol | 125 — Aviation Gasoline<br>130 — Jet Fuel<br>142 — Kerosene   | 072 — Dyed Keroser<br>160 — Diesel Fuel<br>228 — Dyed Diesel F | 285 — So                | o-Diesel – Undyed<br>y Oil<br>o-Diesel – Dyed B |                                | — Blending Compon (Identify) |            |
| SALES INFORMA                                    | ATION   |  |                         |   |                                |                              |            |
| Federal Government Agency                        |   |  | Date of Sale            | Product T                                       | уре                            | Number of Gallo              | ns         |
|  |   |  |                         |   |                                |                              |            |
|  |   |  |                         |   |                                |                              |            |
|  |   |  |                         |   |                                |                              |            |
|  |   |  |                         |   |                                |                              |            |
|  |   |  |                         |   |                                |                              |            |
|  |   |  |                         |   |                                |                              |            |
|  |   |  |                         |   |                                |                              |            |
|  |   |  |                         |   |                                |                              |            |
|  |   |  |                         |   |                                |                              |            |
|  |   |  |                         |   |                                |                              |            |
|  |   | +  |                         |   |                                |                              |            |
| I hereby certify, under                          | penalties of perjury, that the motor  | fuel purchased was sold to                                     | an agency of the federa | al government for us                            | se by that agen                | cy. I further certify that   | I have the |
| I understand and agree                           | upport the sale of the motor fuel.  e that fraudulent use of this certifica e ultimate vendor paying the tax with |  |                         |   |                                |                              | vendor or  |
| PRINT NAME                                       | e uitimate vendor paying the tax witi   | · · · · · · · · · · · · · · · · · · ·                          | THORIZED SIGNATURE (    | <u> </u>  | •                              | DATE                         |            |
|  |   | AC   | THORIZED SIGNATURE C    | OF OLTIMATE VENDOR                              | 1                              |                              |            |
| INTERMEDIATE VENDOR                              | #1  |  |                         |   |                                | FEIN                         |            |
| ADDRESS  |   | Cl   | TY                      |   | STATE                          | ZIP                          |            |
| PRINT NAME                                       |   | AL   | ITHORIZED SIGNATURE     |   |                                | DATE                         |            |
| INTERMEDIATE VENDOR                              | #2  |  |                         |   |                                | FEIN                         |            |
| ADDRESS  |   | Cl   | ТҮ                      |   | STATE                          | ZIP                          |            |
| PRINT NAME                                       |   | AL   | ITHORIZED SIGNATURE     |   |                                | DATE                         |            |
| INTERMEDIATE VENDOR                              | #3  |  |                         |   |                                | FEIN                         |            |
| ADDRESS  |   | CI   | ТҮ                      |   | STATE                          | ZIP                          |            |
| PRINT NAME                                       |   | AL   | JTHORIZED SIGNATURE     |   |                                | DATE                         |            |
|  |   |  |                         |   |                                |                              |            |
| A copy of t                                      | his exemption certificate   | should be retained by  | each vendor. Or         | riginal copy is t                               | to be retain                   | ed by the supplie            | r          |

# Instructions for Ultimate Vendor Certificate Sales To Federal Government Only

#### **General Instructions**

This form is to be completed in order to obtain motor fuel without paying the tax for sale to the U.S. Federal Government or to obtain credit or refund from the supplier on sales charged to a government fueling credit card.

### **Identifying Information**

Ultimate Vendor Name, Address, Telephone and FEIN or Social Security Number: Enter the name and information for the Ultimate Vendor.

#### **Sales Information**

Enter the name of the federal government agency, date of sale, product type and the number of gallons purchased.

The certificate must be signed and dated by the ultimate vendor.

The certificate is passed up the distribution chain between the ultimate vendor and the supplier. Each intermediate vendor must endorse the certificate, keeping a copy for themselves. The original certificate is to be retained by the supplier. As a condition for the supplier to obtain credit on their monthly report, the supplier shall credit or refund the tax to the ultimate vendor, who made the sale to the purchasing entity.

If you have questions or need assistance in completing this form, please call (573) 751-2611 or e-mail excise@dor.mo.gov. You may also access the department's web site at www.dor.mo.gov/tax/business/fuel/forms/ to obtain this form.